



ACE American Insurance Company  
436 Walnut Street  
Philadelphia PA 19106

## Business Auto Declarations

**POLICY NUMBER:** ISA H08684935

**EXPIRING POLICY NUMBER:** ISA H08246129

**RENEWAL**

### ITEM ONE

**Named Insured:** Plum Creek Timber Company, Inc.

See # 10 - Named Insured

**Address:** 999 Third Avenue, Suite 4300  
Seattle, WA 98104

**Producer Number:** 244092

**Producer Name:** AON RISK INSURANCE SERVICES

**Producer Address:** 1420 FIFTH AVENUE  
SEATTLE, WA 98101-4030

**Form of Business:** ☒ **Corporation** ☐ **Limited Liability Company**  
☐ **Other:**

**Named Insured's business:** Real Estate Investment Trusts

**Policy Period:** Policy covers from 06/01/2013 to 06/01/2014 12:01 am standard time at the named insured's address stated above.

**Audit Period:** Annual, unless otherwise stated: ☐ **Semi-Annual** ☐ **Quarterly** ☐

**Total Advance Premium (Including surcharges):** \$66,715.00

**Refer to Surcharge Schedule for surcharge amounts and rates.**

In return for the payment of premium and subject to all the terms of this policy we agree with you to provide the insurance as stated in this policy.



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### ITEM TWO - SCHEDULE OF COVERAGES AND COVERED AUTOS

This policy provides only those coverages where a charge is shown in the premium column below. Each of these coverages will apply only to those "autos" shown as covered "autos". "Autos" are shown as covered "autos" for a particular coverage by the entry of one or more of the symbols from the Covered Autos Section of the Business Auto Coverage Form next to the name of the coverage.

COVERAGES	COVERED AUTOS (Entry of one or more of the symbols from the COVERED AUTO Section of the Business Auto Coverage Form shows which autos are covered autos)	LIMIT THE MOST WE WILL PAY FOR ANY ONE ACCIDENT OR LOSS		PREMIUM
LIABILITY	1	\$1,000,000		\$Included
PERSONAL INJURY PROTECTION (or equivalent No fault Coverage)	5	SEPARATELY STATED IN EACH P.I.P. ENDORSEMENT \$ N/A DED		\$Included
ADDED PERSONAL INJURY PROTECTION (or equivalent Added No fault Coverage)		SEPARATELY STATED IN EACH ADDED P.I.P. ENDORSEMENT.		\$
OPTIONAL BASIC ECONOMIC LOSS COVERAGE (New York Only)		\$		\$
ADDITIONAL PERSONAL INJURY PROTECTION (New York Only)		\$		
		Maximum Monthly Work Loss	\$	
		Death Benefit	\$	
		Other Necessary Expense (per day)	\$	
PROPERTY PROTECTION INSURANCE (Michigan only)		SEPARATELY STATED IN THE P.P.I. ENDORSEMENT. MINUS \$ DED FOR EACH ACCIDENT.		\$
MEDICAL PAYMENTS		\$		\$
MEDICAL EXPENSE AND INCOME LOSS BENEFITS		SEPARATELY STATED IN THE P.P.I. ENDORSEMENT. MEDICAL EXPENSE BENEFITS \$ EACH PERSON INCOME LOSS BENEFITS \$ EACH PERSON		\$
UNINSURED MOTORISTS	6	\$ See DA14671 minimum required by statute		\$Included
UNDERINSURED MOTORISTS (When not included in Uninsured Motorists) (Not Applicable in New York)	6	\$ See DA14671 minimum required by statute		\$Included



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### ITEM TWO - SCHEDULE OF COVERAGES AND COVERED AUTOS (Continued)

COVERAGES	COVERED AUTOS (Entry of one or more of the symbols from the COVERED AUTO Section of the Truckers Coverage Form shows which autos are covered autos)	LIMIT THE MOST WE WILL PAY FOR ANY ONE ACCIDENT OR LOSS	PREMIUM
SUPPLEMENTARY UNINSURED/ UNDERINSURED MOTORIST  (New York only)		\$  The maximum amount payable under SUM coverage shall be the policy's SUM limits reduced and thus offset by the motor vehicle Bodily Injury liability insurance and policy or bond payments received from, or on behalf of, any negligent party involved in the accident as specified in the SUM endorsement.	\$
PHYSICAL DAMAGE COMPREHENSIVE COVERAGE		ACTUAL CASH VALUE OR COST OF REPAIR, WHICHEVER IS LESS, MINUS \$N/A DED. FOR EACH COVERED AUTO, BUT NO DEDUCTIBLE APPLIES TO LOSS CAUSED BY FIRE OR LIGHTNING. (N/A to private passenger type vehicles in NY). <b>See Schedule On File With Company For Vehicle Deductibles.</b> See ITEM FOUR For Hired Or Borrowed "Autos".	\$
PHYSICAL DAMAGE SPECIFIED CAUSES OF LOSS COVERAGE		ACTUAL CASH VALUE OR COST OF REPAIR, WHICHEVER IS LESS MINUS \$ DED. FOR EACH COVERED AUTO FOR LOSS CAUSED BY MISCHIEF OR VANDALISM. <b>See Schedule On File With Company For Vehicle Deductibles.</b> See ITEM FOUR For Hired Or Borrowed "Autos."	\$
PHYSICAL DAMAGE COLLISION COVERAGE		ACTUAL CASH VALUE OR COST OF REPAIR, WHICHEVER IS LESS, MINUS \$N/A DED FOR EACH COVERED AUTO FOR LOSS CAUSED BY COLLISION <b>See Schedule On File With Company For Vehicle Deductibles.</b> See ITEM FOUR For Hired Or Borrowed "Autos."	\$
PHYSICAL DAMAGE TOWING AND LABOR		\$ for each disablement of a private passenger auto.	\$



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### ITEM THREE - SCHEDULE OF COVERED AUTOS YOU OWN

#### DESCRIPTION

Covered Auto No	Year, Model, Trade Name, Serial Number or Vehicle Identification Number (VIN)	Original Cost New	Terr Code
AS PER SCHEDULE ON FILE WITH COMPANY			

### ITEM FOUR - SCHEDULE OF HIRED OR BORROWED AUTO COVERAGE AND PREMIUMS

#### LIABILITY COVERAGE - RATING BASIS, COST OF HIRE

STATE	ESTIMATED COST OF HIRE FOR EACH STATE	RATE PER EACH \$100 COST OF HIRE	FACTOR (if liab. cov. is primary)	PREMIUM
All States on File With Us	\$If Any	\$		\$Included
			<b>TOTAL PREMIUM</b>	\$Included

Cost of hire means the total amount you incur for the hire of "autos" you don't own (not including 'autos" you borrow or rent from your partners or employees or their family members). Cost of hire does not include charges for services performed by motor carriers of property or passengers.

#### PHYSICAL DAMAGE COVERAGE

COVERAGES	LIMIT OF INSURANCE THE MOST WE WILL PAY DEDUCTIBLE	ESTIMATED ANNUAL COST OF HIRE	RATE PER EACH \$100 ANNUAL COST OF HIRE	PREMIUM
COMPREHENSIVE	ACTUAL CASH VALUE OR COST OF REPAIR, WHICHEVER IS LESS, MINUS \$ DED. FOR EACH COVERED AUTO, BUT NO DEDUCTIBLE APPLIES TO LOSS CAUSED BY FIRE OR LIGHTNING. (N/A to Private Passenger type vehicles in NY).	\$	\$	\$
SPECIFIED CAUSES OF LOSS	ACTUAL CASH VALUE OR COST OF REPAIR, WHICHEVER IS LESS, MINUS \$ DED. FOR EACH COVERED AUTO FOR LOSS CAUSED BY MISCHIEF OR VANDALISM.	\$	\$	\$
COLLISION	ACTUAL CASH VALUE OR COST OF REPAIR, WHICHEVER IS LESS, MINUS \$ DED. FOR EACH COVERED AUTO.	\$	\$	\$



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### ITEM FIVE - SCHEDULE FOR NON-OWNERSHIP LIABILITY

NAMED INSURED'S BUSINESS	RATING BASIS	NUMBER	PREMIUM
Other Than A Social Service Agency	Number of Employees	25	\$Included
	Number of Partners		\$
Social Service Agency	Number of Employees		\$
	Number of Volunteers		\$
Garage Service Operations	Number of Employees		\$
	Number of Partners		\$
		<b>TOTAL PREMIUM</b>	\$Included



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FORMS AND ENDORSEMENTS ATTACHED TO POLICY AT INCEPTION

### SCHEDULE OF NOTICES

Form No.	Description
ALL208871006	ACE Producer Compensation Practices & Policies
ALL2Y31b	Arkansas Notice To Policyholders
ALL8Z41 7/2000	Georgia Notice
ALL301520710	Important Information To Idaho Policyholders Regarding Your Insurance
ALL389690812	Important Notice - Wisconsin
DA9T21	Important Notice To Our Oregon Policyholders
ALL4Y30d	Information And Complaints
ALL8W17b0912	Notice To Our Florida Property And Casualty Policyholders Guidelines For Loss Control Plans
ALL5X45	Questions About Your Insurance?
ALL11559d	Risk Control Services For Texas Policyholders
DA8S71a0212	Texas Auto Theft Prevention
ILP0010104	U.S. Treasury Department's Office Of Foreign Assets Control ("OFAC") Advisory Notice To Policyholders
ALL5X51a0206	Wisconsin Notice To Policyholders

### SCHEDULE OF COVERAGE FORMS

Form No.	Description
CA00010310	Business Auto Coverage Form

### SCHEDULE OF ENDORSEMENTS

Endt. No.	Form No.	Description
1	ALL22421	Surcharge Schedule
2	CC1K11G	Signatures
3	DA9U74A	Additional Insured - Designated Persons Or Organizations
4	DA14676	Amendatory Endorsement
5	ALL10617a0606	Earlier Notice Of Cancellation And Non-Renewal Endorsement
6	DA14671	Limits Of Insurance - Uninsured Motorists/Underinsured Motorists
7	DA9T51	Mexico Coverage Endorsement
8	ALL180571211	Notification Of Premium Adjustment
9	DA19479d	Reimbursement Of Deductible Endorsement Allocated Loss Adjustment Expense ("ALAE") Included In The Deductible Amount
10	DA13118	Schedule Of Named Insureds



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Endt. No.	Form No.	Description
11	ALL211011106	Trade Or Economic Sanctions Endorsement
12	DA14672a	Unintentional Errors & Omissions
13	DA13115	Waiver Of Transfer Of Rights Of Recovery Against Others
14	IL09130498	Insurance Inspection Services Exemption From Liability
15	IL00210908	Nuclear Energy Liability Exclusion Endorsement
16	CA99100902	Drive Other Car Coverage - Broadened Coverage For Named Individuals
17	CA99330299	Employees As Insureds
18	CA20551001	Fellow Employee Coverage
19	CA99480306	Pollution Liability - Broadened Coverage For Covered Autos - Business Auto, Motor Carrier And Truckers Coverage Forms
20	CA01621007	Arkansas Changes
21	CA01280309	Florida Changes
22	CA02671112	Florida Changes - Cancellation And Nonrenewal
23	CA22100108	Florida Personal Injury Protection
24	CA01091004	Georgia Changes
25	CA01181100	Idaho Changes
26	CA01030310	Louisiana Changes
27	CA01340609	Maine Changes
28	CA21740608	Maine Uninsured Motorists Coverage
29	CA01100311	Michigan Changes
30	CA02170394	Michigan Changes - Cancellation And Nonrenewal
31	CA22200311	Michigan Personal Injury Protection
32	CA02201003	Montana Changes - Cancellation And Nonrenewal
33	CA02620110	New Hampshire Changes - Cancellation And Nonrenewal
34	CA01110110	New Hampshire Changes In Policy
35	CA31261108	New Hampshire Uninsured Motorists Coverage
36	CA01490110	Oregon Changes
37	CA22360110	Oregon Personal Injury Protection
38	CA21050110	Oregon Uninsured Motorists Coverage - Bodily Injury
39	CA21870110	Oregon Uninsured Motorists Coverage - Property Damage Private Passenger Types
40	CA01500306	South Carolina Changes
41	CA02300410	South Carolina Changes - Cancellation And Nonrenewal
42	CA21190306	South Carolina Uninsured Motorists Coverage
43	CA01960312	Texas Changes
44	CA02430301	Texas Changes - Cancellation And Nonrenewal



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Endt. No.	Form No.	Description
45	CA22640708	Texas Personal Injury Protection Endorsement
46	CA01350108	Washington Changes
47	CA01830902	West Virginia Changes
48	CA02520394	West Virginia Changes - Cancellation
49	CA01890394	West Virginia Changes - Coverage Extension For Temporary Substitute Autos
50	CA21220212	West Virginia Uninsured And Underinsured Motorists Coverage
51	CA99241111	Wisconsin Auto Medical Payments Coverage
52	CA01171111	Wisconsin Changes
53	CA21031111	Wisconsin Uninsured Motorists Coverage
54	IL02310908	Arkansas Changes - Cancellation And Nonrenewal
55	IL09090398	Arkansas Notice
56	IL02620908	Georgia Changes - Cancellation And Nonrenewal
57	IL02040908	Idaho Changes - Cancellation And Nonrenewal
58	IL02770312	Louisiana Changes - Cancellation And Nonrenewal
59	IL02470211	Maine Changes - Cancellation And Nonrenewal
60	IL01890907	Maine Changes - Concealment, Misrepresentation Or Fraud
61	IL02860908	Michigan Changes - Cancellation And Nonrenewal
62	IL02820908	Mississippi Changes - Cancellation And Nonrenewal
63	IL01800907	Montana Changes - Concealment, Misrepresentation Or Fraud
64	IL01670908	Montana Changes - Conformity With Statutes
65	IL01450908	New Hampshire Changes - Civil Union
66	IL01870907	New Hampshire Changes - Concealment, Misrepresentation Or Fraud
67	IL01980908	Nuclear Energy Liability Exclusion Endorsement
68	IL02790908	Oregon Changes - Cancellation And Nonrenewal
69	IL01420908	Oregon Changes - Domestic Partnership
70	IL01460810	Washington Common Policy Conditions
71	IL02810489	West Virginia Changes - Cancellation
72	IL02830907	Wisconsin Changes - Cancellation And Nonrenewal





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THIS DECLARATION AND THE BUSINESS AUTO POLICY AND ENDORSEMENTS, IF ANY, ISSUED TO FORM A PART THEREOF, COMPLETE THE ABOVE NUMBERED POLICY

COUNTERSIGNED BY \_\_\_\_\_  
AUTHORIZED AGENT